Consumer Research Findings

Summary Report on the Medicare Populations with Vision Loss Executive Summary

Background

As part of its long-term strategic plan, the Health Care Financing Administration (HCFA) has undertaken an Agency-wide initiative to adapt its operations to improve communications with Medicare beneficiaries and with its provider partners. Helping beneficiaries to understand their choices among health care plans, providers, and treatment options and the implications of those choices on cost, quality, access and outcomes is especially important now that the Balanced Budget Act of 1997 (BBA) has expanded the health plan options available to beneficiaries. The full range of choices envisioned under BBA is not currently available in the market but an increasing number of beneficiaries will face a much more complex set of choices in the coming years. Medicare beneficiaries not only need to understand the various features of these different options to choose the design that best meets their needs, they also need basic knowledge about many aspects of the Medicare program.

Research Purpose and Methods

The Market Research for Beneficiaries project was designed to provide HCFA with answers to the two fundamental questions that underlie effective communication:

- What information do beneficiaries want or need from HCFA?
- What are the best ways to communicate that information to them?

The Market Research for Beneficiaries project collected data from three sources to answer the questions:

- An inventory of perceived information needs and effective communication strategies from a variety of organizations and individuals who work directly with Medicare beneficiaries,
- · Focus groups with Medicare beneficiaries, and
- A national survey of the Medicare population the Medicare Current Beneficiary Survey (MCBS).

Each of the three data sources has particular strengths. Together, they can provide HCFA with a broad, deep, and representative understanding of communication with beneficiaries. The survey of Medicare beneficiaries helps ensure that the information gathered is representative of Medicare beneficiaries, while the focus groups and inventory of organizations contribute more in-depth information than can be obtained from a large-scale survey. A description of methodologies for each of the data collection tools is contained in a separate appendix.

As part of HCFA's commitment to adapt its operations and communication strategies to better serve all Medicare beneficiaries, the Agency identified a diverse set of beneficiary subgroups that it believes may have special information needs regarding the Medicare program or that may require innovative communication approaches to

effectively convey information to the subgroup. This report synthesizes key findings from the three data sources for one of the identified "hard to reach" beneficiary subgroups – elderly beneficiaries with vision loss (both those with partial vision loss and those who are blind) who are 65 years old or older and not institutionalized. The report compares the subgroup's information needs and best communication strategies with those of the general elderly Medicare population. Additional summary reports examine the information needs and best communication strategies for African American beneficiaries, Hispanic beneficiaries, beneficiaries dually eligible for Medicaid and Medicare, beneficiaries who live in rural areas, beneficiaries with low education or literacy levels, and beneficiaries with hearing loss.

Key Findings and Implications for HCFA Key Findings

Key findings about Medicare beneficiaries with vision loss include the following central points:

- Elderly beneficiaries with vision loss (those who have some or a lot of trouble seeing or who are blind) represent almost 40 percent of the total elderly Medicare population. Because they comprise such a large fraction of the elderly population and are represented in all age groups and sociodemographic categories, beneficiaries with vision loss have generally the same needs and expectations about information and communication sources and modes as the general Medicare population.
- Beneficiaries with vision loss are proportionately older than the general Medicare population, are substantially poorer and less educated, and are in somewhat worse health. They are considerably more likely to have difficulties with activities of daily living and hearing than those in the general Medicare population over 65, and to have difficulties with transportation.
- Important information needs of beneficiaries with vision loss include prevention of, diagnosis of, and treatment for vision loss, coverage of vision assistive devices, and adaptive and coping strategies.
- Beneficiaries with vision loss are very similar to general Medicare beneficiaries in the sources they rely on to obtain information about the Medicare program and related topics. For information about the Medicare program nearly two-thirds of those reporting rely on Medicare. For information about staying healthy a similar proportion relies on providers.
- Because of their condition, however, beneficiaries with vision loss rely more on family and friends to meet their information needs than do beneficiaries in general.
- Printed materials are appreciated and used by beneficiaries with some vision loss but appropriate formatting is critical to achieve maximum legibility.
- Beneficiaries with vision loss view radio as an extremely important medium for receiving information.

• Beneficiary vision losses take a variety of forms and the kinds of limitations on communication materials vary accordingly. For example, printed communications appropriate for beneficiaries with partial vision loss would not meet the needs of the small subset of this population that is blind.

Implications for HCFA

- Recognizing that a large proportion of the Medicare population has some vision loss (40 percent), all communication relying on sight should be designed with this population in mind.
- Given the lower incomes and more fragile health status of beneficiaries who have lost some or all of their sight, when communicating with this population HCFA should emphasize coverage of those benefits that will prevent further deterioration in vision and health and assist in maintaining independence.
- Beneficiaries with vision loss appear more likely to actively seek information but less likely to be able to find needed information than the general Medicare population. Therefore, tailoring communication strategies to this group should be a high priority for HCFA. A dedicated Medicare Hotline or a Medicare Hotline option for those identifying themselves as having "poor vision" or "having trouble reading" should be seriously considered. The dedicated hotline would be a conduit through which information specific to their disability and audiocassette versions of the Medicaid Handbook could be obtained by such beneficiaries.
- As with the general Medicare population, beneficiaries with vision loss rely primarily on HCFA as the source of information about Medicare. HCFA can build on their generally positive feelings about the Medicare program by enhancing its "brand name."
- Beneficiaries with vision loss need information about their condition and related health and rehabilitative services for which they frequently turn to community organizations who work with individuals who have some vision loss or who are blind. HCFA should work in partnership with vision-related consumer organizations to provide comprehensive and accurate information; roundtable discussions and seminars were mentioned as a communication method accessible for all levels of vision loss.
- Because beneficiaries with vision loss differ considerably in their ability to use printed materials, Medicare information should be available not only in appropriately formatted large print, but also in audiocassette and Braille versions.

Organization of Report

This report is organized into four additional chapters:

- A profile of Medicare beneficiaries who have some vision loss or who are blind compared with a profile of the general Medicare population;
- A summary of information needs of beneficiaries with vision loss;
- A discussion of information sources most preferred by beneficiaries with vision loss; and

• A discussion of communication methods most preferred by this population of beneficiaries.

¹The MCBS data used in this report apply only to Medicare beneficiaries age 65 years old or older who were not living in a short-term or long-term care facility during the first two rounds of data collection in 1997.

² See the Appendix to Cahill, et al., Increasing Medicare Beneficiary Knowledge Through Improved Communications: Summary Report on the General Medicare Population, Final Draft, October 1988, Health Care Financing Administration.